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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | | Identify Yourself | | |
|---------|--------------------|--|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on government-issued ire identification (for nple, your driver's | Alexander First name | First name |
| | | ise or passport). | Middle name | Middle name |
| | iden | g your picture tification to your ting with the trustee. | Torres Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | the last 4 digits of Social Security ober or federal vidual Taxpayer tification number | xxx-xx-0466 | |

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Case number (if known)

Debtor 1 Alexander Torres

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 16 Quail Run Rd Lake in the Hills, IL 60156 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code McHenry County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Alexander Torres

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
|----|--|---|----------------|--------------------------------------|---|--|--|--|
| | choosing to file under | ■ Ch | napter 7 | | | | | |
| | | _ | apter 11 | | | | | |
| | | | apter 12 | | | | | |
| | | | apter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typi attorney is subn | ically, if you are paying the fee yo | k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | |
| | | | | | callments. If you choose this options (Official Form 103A). | on, sign and attach the Application for Individuals to Pay | | |
| | | | I request that | at my fee be wai | ived (You may request this option | n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha | | |
| | | | applies to yo | ur family size an | d you are unable to pay the fee ir | n installments). If you choose this option, you must fill out | | |
| | | | те Аррисан | on to have the C | napter / Filling Fee Walved (Offic | ial Form 103B) and file it with your petition. | | |
|). | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes | S. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 0. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 1. | Do you rent your residence? | ■ No. | . Go to | line 12. | | | | |
| | | ☐ Yes | s. Has yo | our landlord obta | ined an eviction judgment agains | t you? | | |
| | | | | No. Go to line 1 | 12. | | | |
| | | | | | | Judgment Against You (Form 101A) and file it as part of | | |

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Page 4 of 54 Document Case number (if known) Debtor 1 **Alexander Torres** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Alexander Torres

Part 5:

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit | |
|--|--|
| counseling because of: | |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Alexander Torres** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alexander Torres Signature of Debtor 2 Alexander Torres Signature of Debtor 1 Executed on Executed on July 10, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Alexander Torres Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jacob Maegli | Date | July 10, 2018 |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Jacob Maegli 6317153 | | |
| Printed name | | |
| Eric Pratt Law Firm P.C. | | |
| Firm name | | |
| 5411 E. State St, Ste 202 | | |
| Rockford, IL 61108 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 815-315-0683 | Email address | rockford@jordanpratt.com |
| 6317153 IL | | |
| D | | |

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| | | DUCUITIE | IIL FAUE O UI 34 | |
|------------------------|--------------------------|---------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Alexander Torres | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | |
| Case number (if known) | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|--------------|-------------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 11,085.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 11,085.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 15,283.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 19,665.00 |
| | Your total liabilities | \$ | 34,948.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,451.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,360.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for bounded purposes." 14.1.1.5.0. \$ 10.1(1) Fill out lines 8.00 for debts included purposes. 28.11.5.0. \$ 1.50 | a personal, | family, or |

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1 Alexander Torres

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ | 1,798.00 |
|----|--|----|----------|
| | | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 18-81449 Doc 1 Filed 07/10/18 Entered 07/10/18 13:49:28 Desc Main Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 Alexander Torres First Name Middle Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Altima Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Debtor 2 only Current value of the Current value of the 52000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$10,000.00 \$10,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here......>>

\$10,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Document Page 11 of 54 Debtor 1 Case number (if known) **Alexander Torres** Yes. Describe..... misc, household & personal items \$200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$200.00 tv, cell phone & other electronic devices 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$25.00 watch 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$625.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Desc Main

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| | | | | claims or exemptions. |
|-----|--|-------------------------|---|-------------------------------|
| 16. | Cash Examples: Money you have in your wa ■ No □ Yes | • | a safe deposit box, and on hand when you file your petition | no |
| 17. | institutions. If you have mu | | certificates of deposit; shares in credit unions, brokerage he same institution, list each. | nouses, and other similar |
| | □ No ■ Yes | | Institution name: | |
| | 17.1. che | ecking _ | Bank of America | \$450.00 |
| | 17.2. sav | rings _ | Bank of America | \$10.00 |
| 18. | Bonds, mutual funds, or publicly tra Examples: Bond funds, investment acc | | e firms, money market accounts | |
| | *** | ution or issuer name: | | |
| 19. | Non-publicly traded stock and intere- joint venture ■ No | ests in incorporated | and unincorporated businesses, including an interes | t in an LLC, partnership, and |
| | Yes. Give specific information about Name of | | % of ownership: | |
| 20. | Non-negotiable instruments are those | nal checks, cashiers' c | and non-negotiable instruments checks, promissory notes, and money orders. o someone by signing or delivering them. | |
| | ■ No □ Yes. Give specific information about Issuer na | | | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Ke | eogh, 401(k), 403(b), t | thrift savings accounts, or other pension or profit-sharing | plans |
| | No | | | |
| | Yes. List each account separately. Type of acc | count: | Institution name: | |
| 22. | | i have made so that yo | ou may continue service or use from a company utilities (electric, gas, water), telecommunications compan | nies, or others |
| | □ Yes | | Institution name or individual: | |
| 23. | Annuities (A contract for a periodic pa | ayment of money to yo | ou, either for life or for a number of years) | |
| | ■ No □ Yes Issuer name and | d description. | | |
| 24. | 26 U.S.C. §§ 530(b)(1), 529A(b), and 53 | | d ABLE program, or under a qualified state tuition pro | ogram. |
| | ■ No □ YesInstitution name | and description. Sepa | arately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | _ | in property (other th | an anything listed in line 1), and rights or powers exe | ercisable for your benefit |
| | ■ No☐ Yes. Give specific information about | t them | | |
| | | | | |

Debtor 1

| | | Case 18-814 | 449 | Doc 1 | Filed 07/10/18 Document | Entered 07/10/18 13:49:28 Page 13 of 54 | Desc Main |
|-----|--------------------|--|---------------|----------------|---|---|--|
| De | btor 1 | Alexander Torres | S | | | Case number (if known) | |
| | Examp ■ No | | names | s, websites, p | ets, and other intellectu roceeds from royalties a | al property nd licensing agreements | |
| 27. | | es, franchises, and | | | | | |
| | ■ No | oles: Building permits Give specific inform | | | , cooperative associatior | n holdings, liquor licenses, professional licens | es |
| | | ' | | bout them | | | |
| Mc | oney or p | property owed to yo | ou? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refu ■ No | unds owed to you | | | | | |
| | ☐ Yes. (| Give specific informa | ation ab | oout them, inc | cluding whether you alrea | ady filed the returns and the tax years | |
| | Examp ■ No | | • | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| | | Give specific informa | | | | | |
| | Examp ■ No | oles: Unpaid wages, of benefits; unpaid | | | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| | | Give specific inform | ation | | | | |
| | | ts in insurance poli ples: Health, disability | | e insurance; l | nealth savings account (F | HSA); credit, homeowner's, or renter's insurar | nce |
| | | Name the insurance | compa | any of each p | olicy and list its value. | | |
| | | | | pany name: | , | Beneficiary: | Surrender or refund value: |
| | | | term value | | v/ St. Anthonys - no ca | ash granddaughter | \$0.00 |
| | | | term value | | v/ Jackson Life - no ca | ash granddaughter | \$0.00 |
| | If you a | | | | someone who has die ct proceeds from a life ins | d surance policy, or are currently entitled to reco | eive property because |
| | | Give specific inform | ation | | | | |
| | Examp ■ No — | oles: Accidents, empl | oymen | | you have filed a lawsui surance claims, or rights | t or made a demand for payment to sue | |
| | | Describe each claim contingent and unlike | | ed claims of | every nature, including | g counterclaims of the debtor and rights to | set off claims |
| | ■ No | Describe each claim | | | , | | - |
| 35. | Any fina | ancial assets you c | did not | already list | | | |

| | Case 18-81449 Doc 1 Filed 07/10/ Document | | 7/10/18 13:49:28 54 | Desc Main |
|------|--|----------------------------|--------------------------|------------------|
| Deb | tor 1 Alexander Torres | | Case number (if known) | |
| | Yes. Give specific information | | | |
| 36. | Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here | • • | - | \$460.00 |
| Part | 5: Describe Any Business-Related Property You Own or Have an Inte | rest In. List any real est | ate in Part 1. | |
| | o you own or have any legal or equitable interest in any business-relat | ed property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You | ı Own or Have an Intere | st In | |
| ган | If you own or have an interest in farmland, list it in Part 1. | TOWN OF Flave all littere | St III. | |
| 46. | Oo you own or have any legal or equitable interest in any farm- | or commercial fishi | ng-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| | | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That Yo | u Did Not List Above | | |
| 53. | Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | ? | | |
| | Examples. Season tickets, country dub membership No | | | |
| _ | Yes. Give specific information | | | |
| _ | Test Sive specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write th | at number here | | \$0.00 |
| | | | | |
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$10,000.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$625.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$460.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$11,085.00 | Copy personal property t | otal \$11,085.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$11,085.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Page 15 of 54 Document Fill in this information to identify your case: Debtor 1 **Alexander Torres** Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | nount of the exemption you claim Specific laws that | allow exemption |
|--|--------------------------------------|---|-----------------|
| | Copy the value from Schedule A/B | eck only one box for each exemption. | |
| misc. household & personal items | \$200.00 | \$200.00 735 ILCS 5/12- | -1001(b) |
| Line Holli Gonedale A.B. G. I | | 100% of fair market value, up to any applicable statutory limit | |
| tv, cell phone & other electronic devices | \$200.00 | \$200.00 735 ILCS 5/12- | ·1001(b) |
| Line Holli Gonedale A.B. 111 | | 100% of fair market value, up to any applicable statutory limit | |
| necessary wearing apparel Line from Schedule A/B: 11.1 | \$200.00 | \$200.00 735 ILCS 5/12- | -1001(a) |
| Line from Gonedate Av.B. 11.1 | | 100% of fair market value, up to any applicable statutory limit | |
| watch Line from Schedule A/B: 12.1 | \$25.00 | \$25.00 735 ILCS 5/12- | -1001(b) |
| Line from Govedule 70B. 12.1 | | 100% of fair market value, up to any applicable statutory limit | |
| checking: Bank of America Line from Schedule A/B: 17.1 | \$450.00 | \$450.00 735 ILCS 5/12- | -1001(b) |
| Line from Schedule Arb. 11.1 | | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B Current value of the portion you claim Specific laws that allow | exemption | |
|---|-----------|--|
| | | |
| | | |
| savings: Bank of America \$10.00 \$10.00 \$10.00 | (b) | |
| 100% of fair market value, up to any applicable statutory limit | | |

| (| ase 18-81449 | Doc 1 Filed 07/1 | | of 54 | 49:28 Desc N | iain |
|---------------------------------|-------------------------------|--|----------------------------|--|--|-----------------------------|
| Fill in this info | ormation to identify you | | | | | |
| Debtor 1 | Alexander Torres | - | | | \neg | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | _ | if this is an led filing |
| Official Fo | rm 106D | | | | . | |
| | | Who Have Clai | ims Secured | by Property | y | 12/15 |
| | the Additional Page, fill it | If two married people are filing out, number the entries, and a | | | | |
| 1. Do any credito | ors have claims secured by | y your property? | | | | |
| ☐ No. Che | eck this box and submit t | his form to the court with you | ur other schedules. You | u have nothing else to | report on this form. | |
| Yes, Fil | I in all of the information | below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | more than one secured claim, lis | at the exaditor concretely | Column A | Column B | Column C |
| for each claim. I | If more than one creditor has | s a particular claim, list the other cal order according to the credit | creditors in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Gm Fina | ancial | Describe the property that s | ecures the claim: | \$15,283.00 | \$10,000.00 | \$0.00 |
| Creditor's N | lame | 2013 Nissan Altima 520 | 000 miles | | | |
| Ро Вох | 181145 | As of the date you file, the c | laim is: Check all that | | | |

| | | | value of collateral. | claim | If any | |
|---|-------------------------------|---|----------------------|-------------|--------|------|
| 2.1 Gm Financial | | Describe the property that secures the cla | aim: \$15,283.00 | \$10,000.00 | \$ | 0.00 |
| Creditor's Name | | 2013 Nissan Altima 52000 miles | | | | |
| Po Box 181145 Arlington, TX 7609 | 96 | As of the date you file, the claim is: Check apply. Contingent | all that | | | |
| Number, Street, City, State | & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the debt? Chec | ck one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ■ An agreement you made (such as mortga | age or secured | | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debtor 2 on | ly | ☐ Statutory lien (such as tax lien, mechanic | 's lien) | | | |
| At least one of the debtors | s and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relate community debt | es to a | ☐ Other (including a right to offset) | | | | _ |
| 0 A | Opened 1/18 Last active | | 4697 | | | |
| Date debt was incurred 5 | /31/18 | Last 4 digits of account number | TUUI | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$15,283.00 If this is the last page of your form, add the dollar value totals from all pages. \$15,283.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | 0000 10 01440 | Document | Page 18 | 8 of 54 | J.20 D03 | o main |
|---------------------------------------|--|--|--------------------|-----------------------------------|--------------------|---------------------------------------|
| Fill in thi | s information to identify your | | 1 000 ± | | | |
| Debtor 1 | Alexander Torres | | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | | | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | | |
| Case nur | nber | | | | | |
| (if known) | | | | | ☐ CI | neck if this is an |
| | | | | | ar | nended filing |
| Official | Form 106E/F | | | | | |
| | | ho Have Unsecured | Claima | | | 12/15 |
| | | e Part 1 for creditors with PRIORIT | | | | |
| Schedule I eft. Attach name and | D: Creditors Who Have Claims Sec the Continuation Page to this pag case number (if known). | ired Leases (Official Form 106G). If ured by Property. If more space is ge. If you have no information to re | needed, copy t | he Part you need, fill it out, | , number the ent | ries in the boxes on the |
| Part 1: | List All of Your PRIORITY Un | | | | | |
| | y creditors have priority unsecure | u ciaillis agailist you? | | | | |
| | . Go to Part 2. | | | | | |
| ☐ Ye | s. List All of Your NONPRIORIT | V Unacquired Claims | | | | |
| Part 2: | | | | | | |
| 3. Do an | y creditors have nonpriority unsec | cured claims against you? | | | | |
| □ No | . You have nothing to report in this p | art. Submit this form to the court with | your other sche | edules. | | |
| ■ Ye | S. | | | | | |
| unsec | ured claim, list the creditor separately ne creditor holds a particular claim, li | aims in the alphabetical order of the y for each claim. For each claim listed ist the other creditors in Part 3.If you | l, identify what t | ype of claim it is. Do not list c | laims already incl | uded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 A | Afni, Inc. | Last 4 digits of acc | ount number | 2535 | | \$264.00 |
| | Ionpriority Creditor's Name | | | | - | · · · · · · · · · · · · · · · · · · · |
| | Po Box 3097 Bloomington, IL 61702 | When was the deb | incurred? | Opened 08/17 | | |
| | lumber Street City State Zlp Code | As of the date you | file, the claim i | s: Check all that apply | | |
| v | Vho incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| _ | At least one of the debtors and and | _ ' | RITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a com | | | | | |
| d | ebt | ☐ Obligations arisin | | ration agreement or divorce t | that you did not | |
| _ | s the claim subject to offset? | report as priority clai | | | | |
| | No | · | - | g plans, and other similar del | | |
| | Yes | Other Specify | Collection A | ttorney Cox Communic | cations | |

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| Alexander Forres | | Case number (if know) | | | | | |
|---|--|---|--|--|--|--|--|
| Amex | Last 4 digits of account number | 5103 | \$0.00 | | | | |
| Po Box 297871 | When was the debt incurred? | Opened 06/12 Last Active 06/13 | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| Yes | ■ Other. Specify Credit Card | | | | | | |
| Blitt and Gaines | Last 4 digits of account number | | \$0.00 | | | | |
| 661 W Glenn Ave | When was the debt incurred? | | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | | |
| ■ Debtor 1 only □ Contingent | | | | | | | |
| Debtor 2 only | ☐ Debtor 2 only ☐ Unliquidated | | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| ☐ Check if this claim is for a community | | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | | |
| ■ No | Debts to pension or profit-sharing | | | | | | |
| Yes | Other. Specify notice | | | | | | |
| Cap1/bstby | Last 4 digits of account number | 8610 | \$0.00 | | | | |
| Nonpriority Creditor's Name | | Opened 9/20/12 Last Active | | | | | |
| Po Box 30253 Salt Lake City, UT 84130 | When was the debt incurred? | 8/27/13 | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| \square At least one of the debtors and another | <u></u> | d claim: | | | | | |
| Check if this claim is for a community | | | | | | | |
| Is the claim subject to offset? | report as priority claims | , | | | | | |
| ■ No | | | | | | | |
| Yes | Other. Specify Charge Acc | ount | | | | | |
| | Amex Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Blitt and Gaines Nonpriority Creditor's Name 661 W Glenn Ave Wheeling, IL 60090 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Cap1/bstby Nonpriority Creditor's Name Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Cap1/bstby Nonpriority Creditor's Name Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? | Amex Nonpriority Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only The claim subject to offset? Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 | Amex Noppointy Creditor's Name Po Box 297871 Fort Lauderdale, FL 33329 Number Street City State 2p Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Last 4 digits of account number Debtor 3 and Debtor 2 only Debtor 2 only Last Active 06/13 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Nonpronty Creditor's Name Cap 1/bstby Noppority Creditor's Name Po Box 30253 Salt Lake City, UT 84130 Number Street City, State 2p Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Noppority Creditor's Name Po Box 30253 Salt Lake City, UT 84130 Number Street City, State 2p Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only | | | | |

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| Denioi | Alexander Fortes | | Case Hulliber (II know) | | | |
|--------|---|---|--|------------|--|--|
| 4.5 | Chase Card | Last 4 digits of account number | 1947 | \$6,723.00 | | |
| | Nonpriority Creditor's Name Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 07/12 Last Active 1/05/14 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s of the date you file, the claim is: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | tration agreement of divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Credit Card | | | | |
| 4.6 | Choice Recovery | Last 4 digits of account number | 9239 | \$80.00 | | |
| | Nonpriority Creditor's Name 1550 Old Henderson Rd St Columbus, OH 43220 | When was the debt incurred? | Opened 12/17 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | · | , | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | |
| | Yes | ■ Other. Specify Associates | | | | |
| 4.7 | Credit One Bank Na | Last 4 digits of account number | 6206 | \$0.00 | | |
| | Nonpriority Creditor's Name Po Box 98872 Las Vegas, NV 89193 | When was the debt incurred? | Opened 12/16 Last Active 4/27/17 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a separation | | | | |
| | Is the claim subject to offset? | | | | | |
| | No | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card | | | | |
| | ☐ Yes | | | | | |

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| Debtor | 1 Alexander Torres | | Case number (if know) | | | |
|--------|--|--|---|----------|--|--|
| 4.8 | Curacao Nonpriority Creditor's Name | Last 4 digits of account number | 6099 | \$0.00 | | |
| | 1605 W Olympic Blvd Ste Los Angeles, CA 90015 | When was the debt incurred? | Opened 12/10 Last Active 4/01/11 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | _ | | | | |
| | Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | ount | | | |
| | | | | | | |
| 4.9 | Dsnb Macys Nonpriority Creditor's Name | Last 4 digits of account number | 9280 | \$351.00 | | |
| | Po Box 8218 Mason, OH 45040 | When was the debt incurred? | Opened 11/11 Last Active 12/20/17 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | |
| | Yes | Other. Specify Charge Acc | | | | |
| 4.1 | Genesis Bc/celtic Bank | Last 4 digits of account number | 6717 | \$468.00 | | |
| 0 . | Nonpriority Creditor's Name | | | ******* | | |
| | 268 S State St Ste 300 Salt Lake City, UT 84111 | When was the debt incurred? | Opened 01/18 Last Active 6/05/18 | | | |
| = | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Credit Card | | | | |
| | □ 169 | Other. Specify | | | | |

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| Debt | or 1 Alexander Torres | | Case number (if know) | | | |
|----------|---|---|----------------------------------|------------|--|--|
| 4.1 | | | | | | |
| 1 | Healthcare Coll I Llc | Last 4 digits of account number | <u>3510</u> | \$200.00 | | |
| | Nonpriority Creditor's Name 2224 W Northern Ave Ste Phoenix, AZ 85021 | When was the debt incurred? | Opened 09/14 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify Collection A | ttorney Banner Estrella | | | |
| 4.1 2 | Midland Funding | Last 4 digits of account number | 1626 | \$1,842.00 | | |
| | Nonpriority Creditor's Name | | | , , | | |
| | 2365 Northside Dr Ste 30 | When was the debt incurred? | Opened 08/15 | | | |
| | San Diego, CA 92108 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | , | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharin | | | | |
| | Yes | Other. Specify Factoring C | ompany Account Synchrony Bank | | | |
| 4.1 | Midland Funding | Last 4 digits of account number | 0381 | \$597.00 | | |
| 3 | Nonpriority Creditor's Name | | | Ψσσσσ | | |
| | 2365 Northside Dr Ste 30 San Diego, CA 92108 | When was the debt incurred? | Opened 08/17 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ At least one of the debtors and another □ Disputed □ Type of NONPRIORITY unsecured claim: | | | | |
| | \square At least one of the debtors and another | | | | | |
| | Check if this claim is for a community | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | debt Is the claim subject to offset? | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify N.A. | ompany Account Credit One Bank | | | |

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| Debt | or 1 Alexander Torres | | Case number (if know) | | | | |
|----------|--|---|--|-------------------|--|--|--|
| 4.1 | B 44 11 B | | 0500 | 4. 7 00 00 | | | |
| 4 | Portfolio Recov Assoc | Last 4 digits of account number | 2538 | \$4,790.00 | | | |
| | Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 08/14 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Factoring Co | ompany Account Synchrony Bank | | | | |
| 4.1 5 | Portfolio Recov Assoc | Last 4 digits of account number | 8610 | \$2,214.00 | | | |
| | Nonpriority Creditor's Name | | Opened 12/16 Lept Active | | | | |
| | 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 12/16 Last Active 5/10/18 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only □ Contingent | | | | | | |
| | □ Debtor 2 only □ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify Factoring C | ompany Account Citibank N.A. | | | | |
| 4.1 6 | Portfolio Recov Assoc | Last 4 digits of account number | 0870 | \$484.00 | | | |
| | Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 08/16 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | • | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | <u> </u> | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | | | ompany Account Capital One Bank | | | | |
| | Yes | Other. Specify Usa N.A. | | | | | |

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| Debt | or 1 Alexander Torres | | Case number (if know) | | | | |
|----------|--|--|--|----------|--|--|--|
| 4.1 7 | Portfolio Recov Assoc | Last 4 digits of account number | 5782 | \$432.00 | | | |
| | Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 06/17 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharin | a plans, and other similar debts | | | | |
| | ■ No Yes | | | | | | |
| | ☐ Yes | Other. Specify Factoring C | ompany Account Synchrony Bank | | | | |
| 4.1 8 | Stanisccontr | Last 4 digits of account number | 43N1 | \$210.00 | | | |
| | Nonpriority Creditor's Name 914 14th St Modesto, CA 95353 | When was the debt incurred? | Opened 1/30/17 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Cep Americ | a Illinois | | | | |
| | | | | | | | |
| 4.1 9 | Syncb/chevron | Last 4 digits of account number | 5782 | \$0.00 | | | |
| | Nonpriority Creditor's Name P.o Box 965015 Orlando, FL 32896 | When was the debt incurred? | Opened 10/12 Last Active 9/19/16 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Debtor 2 only ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | Check if this claim is for a community | · · · · · · · · · · · · · · · · · · · | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | □ Yes | · | • • | | | | |
| | ☐ Yes ☐ Other. Specify Charge Account | | | | | | |

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| Debio | Alexander rorres | | Case Humber (II know) | |
|-------|---|--|--|--------|
| 4.2 | Syncb/dillards Dc | Last 4 digits of account number | 3570 | \$0.00 |
| | Nonpriority Creditor's Name Po Box 965024 Octobrida FL 23206 | When was the debt incurred? | Opened 11/13/11 Last Active 12/09/13 | |
| | Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Credit Card | | |
| 4.2 | Syncb/jcp Nonpriority Creditor's Name | Last 4 digits of account number | 9681 | \$0.00 |
| | Po Box 965007 Orlando, FL 32896 | When was the debt incurred? | Opened 6/24/12 Last Active 3/25/14 | |
| | Number Street City State Zlp Code As of the date you file, the claim | | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | and the second s | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.2 | Syncb/lowes Nonpriority Creditor's Name | Last 4 digits of account number | 9733 | \$0.00 |
| | Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | Opened 3/05/12 Last Active 2/01/13 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Charge Acc | | |
| | — 163 | Other. Specify Offarge Acc. | | |

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| Debi | or 1 Alexander Forres | | Case number (if know) | | | | | | |
|----------|--|--|--|----------|--|--|--|--|--|
| 4.2 3 | Syncb/walmart Dc | Last 4 digits of account number | 2462 | \$0.00 | | | | | |
| | Nonpriority Creditor's Name | | Opened 6/22/12 Last Active | | | | | | |
| | Po Box 965024 Orlando, FL 32896 | When was the debt incurred? | 12/23/13 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | | | | | |
| 4.2 4 | Tbom/total Crd | Last 4 digits of account number | 2017 | \$424.00 | | | | | |
| | Nonpriority Creditor's Name | _ | | | | | | | |
| | 5109 S Broadband Lane Sioux Falls, SD 57109 | When was the debt incurred? | Opened 12/17 Last Active 3/31/18 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | | | | | |
| 4.2 5 | Thd/cbna | Last 4 digits of account number | 4929 | \$586.00 | | | | | |
| | Nonpriority Creditor's Name | | Opened 03/12 Last Active | | | | | | |
| | Po Box 6497 | When was the debt incurred? | 4/07/15 | | | | | | |
| | Sioux Falls, SD 57117 | | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | | |
| | ■ Debtor 1 only | Constituent. | | | | | | | |
| | Debtor 2 only | ☐ Contingent | | | | | | | |
| | Debtor 1 and Debtor 2 only | _ ' | | | | | | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | ☐ Yes | ■ Other Specify Charge Acc | ount | | | | | | |
| | | - Other Opening | | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Alexander Torres

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | - | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 19,665.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 19,665.00 |

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Document Fill in this information to identify your case: Debtor 1 **Alexander Torres** Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | City | | State | ZIP Code | |
| 2.2 | Maria | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | _ |
| | Number | Sileet | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | Oity | | Oldic | Zii Oode | |
| 2.4 | Name | | | | _ |
| | ivame | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | 140111001 | Ollect | | | |
| | City | | State | ZIP Code | _ |
| | Oity | | Oldic | 211 0000 | |

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| | | Docume | ent Page 29 d | of 54 | |
|---------------------------|--|---|---------------------------|---|----------|
| Fill in this | s information to identify you | ur case: | | | |
| Debtor 1 | Alexander Terre | • | | | |
| Debior 1 | Alexander Torre | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fili | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the | : NORTHERN DISTRICT | OE ILLINOIS | | |
| United Sta | ales bankrupicy Court for the | . NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | ber | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| | | | | | |
| Officia | l Form 106H | | | | |
| Sched | dule H: Your Co | debtors | | 12/1 | 5 |
| 501100 | <u> </u> | 4051010 | | 12/1 | <u> </u> |
| ill it out, a our name | and number the entries in the and case number (if know | ne boxes on the left. Attach n). Answer every question | n the Additional Page t | tion. If more space is needed, copy the Additional Pa to this page. On the top of any Additional Pages, writ | |
| 1. Do | you have any codebtors? (| If you are filing a joint case, | do not list either spouse | e as a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | S | | | | |
| | thin the last 8 years, have y na, California, Idaho, Louisiar | | | ry? (Community property states and territories include ington, and Wisconsin.) | |
| ■ No | . Go to line 3. | | | | |
| | . Go to line 3. s. Did your spouse, former sp | oouse, or legal equivalent live | e with you at the time? | | |
| — 10. | s. Dia your spouse, former sp | ouse, or legal equivalent live | with you at the time: | | |
| in line Form | e 2 again as a codebtor onl | y if that person is a guaran | tor or cosigner. Make | r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Off D6G). Use Schedule D, Schedule E/F, or Schedule G t | icial |
| | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the de | bt |
| | Name, Number, Street, City, State and | d ZIP Code | | Check all schedules that apply: | |
| 3.1 | | | | Cohodulo D. lino | |
| 3.1 | Name | | | ☐ Schedule D, line | |
| | | | | ☐ Schedule E/F, line | |
| | | | | □ Scriedule G, line | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, line | |
| 0.2 | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule C/F, line | |
| = | | | | | |
| | Number Street | State | ZID Codo | | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify y | our case: | | | | | | | |
|--------------------|--|---|---|------------|-----------------|--|------------------------------|---------------------------|-----------------|
| Del | btor 1 Alexand | der Torres | | | _ | | | | |
| | btor 2 buse, if filing) | | | | _ | | | | |
| Uni | ited States Bankruptcy Court f | or the: NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number | | - | | | Check if this is: An amende A supplement | ed filing ent showing | | |
| \bigcirc | fficial Form 106I | | | | | | | lowing date: | |
| | chedule I: Your | Income | | | | MM / DD/ Y | YYY | | 12/15 |
| sup spo atta | plying correct information. I use. If you are separated an | s possible. If two married peo If you are married and not filii d your spouse is not filing wi orm. On the top of any additi ment | ng jointly, and your s ith you, do not includ | pouse i | s livi natio | ng with you, incluen about your spo | ude informa ouse. If mor | ation about e space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-fili | ng spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | ■ Employed□ Not employed | | | | ☐ Employed ☐ Not employed | | |
| | | Occupation | advisor | | | | | | |
| | Include part-time, seasonal, self-employed work. | or Employer's name | Jiffy Lube | | | | | | |
| | Occupation may include stu or homemaker, if it applies. | dent Employer's address | | | | | | | |
| | | How long employed t | here? <u>1 1/12 ye</u> | ears | | | | | |
| Pai | rt 2: Give Details Abou | ıt Monthly Income | | | | | | | |
| | mate monthly income as of use unless you are separated. | the date you file this form. If | you have nothing to re | port for a | any li | ne, write \$0 in the | space. Inclu | ude your nor | n-filing |
| If yo | ou or your non-filing spouse ha e space, attach a separate sh | ave more than one employer, co | ombine the information | for all e | mplo | yers for that perso | on on the line | es below. If y | you need |
| | | | | | | For Debtor 1 | For Debt non-filin | tor 2 or g spouse | |
| 2. | | , salary, and commissions (b nthly, calculate what the monthl | | 2. | \$_ | 1,798.00 | \$ | N/A | |
| 3. | Estimate and list monthly | overtime pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4 | Calculate gross Income | Add line 2 + line 3 | | 4 | \$ | 1 798 00 | \$ | Ν/Δ | |

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| Deb | tor 1 | Alexander Torres | _ | С | ase | number (<i>if known</i>) | | | | |
|-----|---------------|---|------------|----|-----------|----------------------------|----------|--------------------|----------------|------------------|
| | | | | | For | Debtor 1 | | or Debtor | | |
| | Con | y line 4 here | 4. | | \$ | 1,798.00 | \$ | on-filing s | spouse N/A | |
| | OOP, | y line 4 nere | • | | Ψ_ | 1,7 30.00 | Ψ | | 1 1// 1 | = |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 347.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5e. 5f. | Insurance Domestic support obligations | 5e. 5f. | | \$_ \$ | 0.00 | \$ \$ | | N/A N/A | _ |
| | 5g. | Union dues | 5g. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | 5h. | | <u> </u> | 0.00 | | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | 9 | s — | 347.00 | \$ | - | N/A | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | • \$ | 1,451.00 | \$ | | N/A | _ |
| | | | ۲. | • | Φ | 1,451.00 | φ | - | IN/A | = |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm | | | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a | | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | | \$ | 0.00 | \$ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | | | |
| | | settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e. | | \$ | 0.00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | | \$ | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | — 8g. | | \$ | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h. | | \$ _ | 0.00 | | | N/A | _ |
| | | | _ | | | | Ė | | ,,, | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$ | | N// | 4 |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,451.00 + \$ | | N/A | = \$ | 1,451.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | | | · |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your r friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not exify: | depe | | | | | n <i>Schedul</i> e | e J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | | \$ | 1,451.00 |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | | | Combi month | nea ly income |
| | | No. | | | | | | | | |
| | | Yes Evolain: | | | | | | | | |

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| Fill in this i | information to identify yo | our case: | | | | |
|---------------------------|---|--|---------------------------|-----------------------------------|-----------------|--|
| Debtor 1 | Alexander To | | | Che | eck if this is: | |
| Debtor 2 (Spouse, if f | filing) | | | _ | | wing postpetition chapter the following date: |
| United State | es Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF ILLINOIS | | MM / DD / YYYY | |
| Case number (If known) | er | | | | | |
| - | al Form 106J | Evnonsos | | | | 12/1 |
| Be as con information | nplete and accurate as | s possible. If two marrie eeded, attach another sh | | | | or supplying correct |
| | Describe Your Houses | ehold | | | | |
| ■ No | D. Go to line 2. Does. Does Debtor 2 live No | in a separate household | | e Household of Del | btor 2. | |
| 2. Do y o | ou have dependents? | ■ No | | | | |
| Do no Debto | ot list Debtor 1 and or 2. | ☐ Yes. Fill out this info each depender | | t's relationship to r Debtor 2 | Dependent's age | Does dependent live with you? |
| | ot state the ndents names. | | | | | □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes |
| expe | our expenses include nses of people other t self and your depende | | | | | ☐ Yes |
| Estimate : | your expenses as of your expenses as your expenses | ing Monthly Expenses our bankruptcy filing da bankruptcy is filed. If th | | | | apter 13 case to report of the form and fill in the |
| the value | | non-cash government and have included it on So | | | Your exp | enses |
| | rental or home owners ents and any rent for th | ship expenses for your r ne ground or lot. | esidence. Include first m | nortgage 4. | \$ | 0.00 |
| If not | included in line 4: | | | | | |
| 4a. 4b. 4c. | | s, or renter's insurance epair, and upkeep expens | es | 4a. 4b. 4c. | \$ = | 0.00 0.00 0.00 |
| 4d. 5. Addi t | | tion or condominium dues ents for your residence, | | 4d. ans 5. | | 0.00 |

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| Debtor 1 | Alexander Torres | Case num | ber (if known) | |
|------------------------|---|-------------|-------------------|-----------------------------|
| i. Util | ities: | | | |
| o. Uti l 6a. | Electricity, heat, natural gas | 6a. | \$ | 0.00 |
| 6b. | Water, sewer, garbage collection | 6b. | · | 0.00 |
| | | | · | |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | | 200.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| Foo | od and housekeeping supplies | 7. | \$ | 200.00 |
| Chi | Idcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 100.00 |
| o. Per | sonal care products and services | 10. | \$ | 50.00 |
| i. Me | dical and dental expenses | 11. | \$ | 0.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | | • | |
| | not include car payments. | 12. | \$ | 200.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 150.00 |
| | aritable contributions and religious donations | 14. | · | 0.00 |
| | • | 17. | Ψ | 0.00 |
| | urance. not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | . Life insurance | 15a. | \$ | 0.00 |
| | | | · | |
| | . Health insurance | 15b. | · | 0.00 |
| | . Vehicle insurance | 15c. | | 90.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| . Tax | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | _ | | |
| Spe | ecify: | 16. | \$ | 0.00 |
| . Ins | tallment or lease payments: | | | |
| 17a | . Car payments for Vehicle 1 | 17a. | \$ | 370.00 |
| 17b | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | . Other. Specify: | 17c. | \$ | 0.00 |
| | Other. Specify: | 17d. | | 0.00 |
| | ir payments of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| | lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| | | 19. | Ψ | 0.00 |
| | ecify: | | Incomo | |
| | er real property expenses not included in lines 4 or 5 of this form or on Sche | 20a. | | 0.00 |
| | . Mortgages on other property | | · | 0.00 |
| | . Real estate taxes | 20b. | | 0.00 |
| 200 | . Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| 200 | . Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e | . Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Oth | er: Specify: | 21. | +\$ | 0.00 |
| | | | | 0.00 |
| | culate your monthly expenses | | | |
| 228 | . Add lines 4 through 21. | | \$ | 1,360.00 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,360.00 |
| 220 | . Add into 22d and 22D. The result is your monthly expenses. | | ^Ψ | 1,000.00 |
| B. Cal | culate your monthly net income. | | | |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 1,451.00 |
| | Copy your monthly expenses from line 22c above. | 23b. | · | 1,360.00 |
| 201 | . Supply san monthly expended from the 220 above. | 200. | <u> </u> | 1,300.00 |
| 234 | . Subtract your monthly expenses from your monthly income. | | | |
| 230 | The result is your <i>monthly net income</i> . | 23c. | \$ | 91.00 |
| | The result is your monuny net income. | _00. | | |
| 4 Da | you expect an increase or decrease in your expenses within the year after yo | u file this | form? | |
| | example, do you expect to finish paying for your car loan within the year or do you expect your | | | se or decrease because of a |
| | lification to the terms of your mortgage? | ortgage | paymont to moreas | doorodoo booddoo or a |
| | , 55 | | | |
| | | | | |
| | Yes. Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------------------|--|--------------------------|----------------------------|---|-------------------------------------|
| Debtor 1 | Alexander Torres | | | | |
| 5 5 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | _ | heck if this is an mended filing |
| Official Forr | | | | | |
| Declarat | tion About a | an Individual | Debtor's Sc | hedules | 12/15 |
| Sig | ın Below | | | | |
| Did you pa | ay or agree to pay some | eone who is NOT an attor | ney to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | Attach Bankruptcy Petitic Declaration, and Signatu | |
| • | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules file | ed with this declaration and | |
| X /s/ Alex | xander Torres | | X | | |
| Alexan | nder Torres ure of Debtor 1 | | Signature of | Debtor 2 | |
| Date | July 10, 2018 | | Date | | |

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| Fill | in this inform | nation to identify you | r case: | | | |
|---------------------|---|--|--|---|---|---|
| Deb | otor 1 | Alexander Torres | Middle Name | Last Name | | |
| Deb | otor 2 | First Name | Middle Name | Last Name | | |
| | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | se number | | | | | Check if this is an mended filing |
| Sta Be a info | s complete a | of Financial | ble. If two married people a | | ankruptcy equally responsible for sup y additional pages, write you | |
| Par | t 1: Give D | etails About Your Ma | nrital Status and Where You | ı Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | □ Married■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | t all of the places you I | ived in the last 3 years. Do n | ot include where you live now | <i>i</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. state | | | | | ity property state or territory ico, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Sch</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Par | t 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | I amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including partetogether, list it only once ur | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$6,700.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | Debtor 1 | | Debtor 2 | | |
|----|--------------------------------|-----------------------------------|--|--|---|--|---------------------|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of incor Check all that app | | Gross income (before deductions and exclusions) |
| | | ndar year: o December | 31, 2017) | ■ Wages, commissions, bonuses, tips | \$14,209.00 | ☐ Wages, comm bonuses, tips | issions, | |
| | | | | ☐ Operating a business | | ☐ Operating a bu | ısiness | |
| | | ndar year be December | | ■ Wages, commissions, bonuses, tips | \$16,785.00 | ☐ Wages, comm bonuses, tips | issions, | |
| | | | | ☐ Operating a business | | ☐ Operating a bu | ısiness | |
| | and other winnings. List each | r public bene . If you are fil | fit payments; ing a joint cas the gross inco | ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat | est; dividends; money collect you received together, list it co | ted from lawsuits; ro only once under Deb | yalties; and tor 1. | |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of incor Describe below. | ne | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | st Certain Pa | yments You | Made Before You Filed for | Bankruptcy | | | |
| 6. | Are eithe □ No. | Neither D | ebtor 1 nor [| 's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol | i <mark>mer debts.</mark> Consumer debt | s are defined in 11 U | .S.C. § 101(| 8) as "incurred by an |
| | | During the No. | - | ore you filed for bankruptcy, di | d you pay any creditor a tota | I of \$6,425* or more | ? | |
| | | □ No. □ Yes | Go to line 7 | '. each creditor to whom you pai | d a total of \$6 425* or more i | n one or more navm | ents and the | total amount you |
| | | | paid that cr not include | reditor. Do not include paymen payments to an attorney for the ton 4/01/19 and every 3 years | its for domestic support obligation is bankruptcy case. | ations, such as child | d support and | |
| | ■ Vec | | | or both have primarily consu | | | , | |
| | - 103 | | | ore you filed for bankruptcy, di | | I of \$600 or more? | | |
| | | No. | Go to line 7 | 7. | | | | |
| | | □ Yes | include pay | each creditor to whom you pai ments for domestic support of r this bankruptcy case. | | | | |
| | Credito | r's Name an | d Address | Dates of payme | nt Total amount | Amount you | Was this pa | yment for |

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Page 37 of 54 Document Case number (if known) Debtor 1 **Alexander Torres** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Portfolio Recovery Associates collection McHenry County □ Pending ٧s ☐ On appeal **Alexander Torres** Concluded 17SC3049 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** portffolio recovery 4/2018 to \$0.00 payroll deduction 120 Corporate Blvd present Norfolk, VA 23502 ☐ Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☐ Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was Amount taken

Case 18-81449 Doc 1 Filed 07/10/18 Entered 07/10/18 13:49:28 Desc Main Page 38 of 54 Document Debtor 1 **Alexander Torres** Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details.

Person Who Was Paid

Email or website address

Eric Pratt Law Firm P.C.

5411 E. State St, Ste 202 Rockford, IL 61108 rockford@jordanpratt.com

Person Who Made the Payment, if Not You

Address

Description and value of any property

transferred

Attorney Fees

Amount of

\$1,467.00

payment

Date payment

made

5/9/2018

or transfer was

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Debtor 1 Alexander Torres

| Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to an promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | perty to anyone who |
|---|---|--|--------------------------------|--|---|
| | NoYes. Fill in the details. | | | | |
| | Person Who Was Paid Address | Description and variansferred | alue of any proper | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptransferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alread No | business or financial affa made as security (such as t | airs? the granting of a sec | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Received Transfer Address | Description and v | | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person's relationship to you | | | F | |
| 19. | Within 10 years before you filed for bankribeneficiary? (These are often called asset-p No Yes. Fill in the details. | | y property to a seli | f-settled trust or similar device | e of which you are a |
| | Name of trust | Description and v | alue of the propert | y transferred | Date Transfer was made |
| | 8: List of Certain Financial Accounts, I | | . D | 11-16- | |
| | Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass No Yes. Fill in the details. | tcy, were any financial ac | counts or instrume | ents held in your name, or for | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account of instrument | or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details. | 1 year before you filed for | bankruptcy, any s | afe deposit box or other depo | sitory for securities, |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | scribe the contents | Do you still have it? |
| 22. | Have you stored property in a storage uni | · | home within 1 yea | r before you filed for bankrup | otcy? |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | scribe the contents | Do you still have it? |

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Debtor 1 Alexander Torres

| Pa | Int 9: Identify Property You Hold or Control for | Someone Else | | | | | |
|--|---|---|-------|---|--------------------|--|--|
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or for someone. | | | | | | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | escribe the property | Value | | |
| | parents same as debtor | | | ome, cars, personal & ousehold items | Unknown | | |
| Pa | art 10: Give Details About Environmental Informa | ation | | | | | |
| or | r the purpose of Part 10, the following definitions | apply: | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul Site means any location, facility, or property as to own, operate, or utilize it, including disposal | ir, land, soil, surface water, groun bstances, wastes, or material. defined under any environmental | dwa | ter, or other medium, including st | atutes or | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s | mental law defines as a hazardou | s wa | aste, hazardous substance, toxic s | substance, | | |
| Rep | port all notices, releases, and proceedings that yo | ou know about, regardless of whe | n the | ey occurred. | | | |
| Ċ | Has any governmental unit notified you that you | , • | | | ental law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any | Have you notified any governmental unit of any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any env | riron | mental law? Include settlements | and orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | |
| Pa | art 11: Give Details About Your Business or Con | nections to Any Business | | | | | |
| | Within 4 years before you filed for bankruptcy, | • | nv o | f the following connections to an | , husiness? | | |
| ٠,, | ☐ A sole proprietor or self-employed in a t | • | • | | , pusitiess: | | |
| | ☐ A member of a limited liability company | | | - | | | |
| | ☐ A partner in a partnership | (LLO) or minica hability partiters | b (| : <i> </i> | | | |
| | ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation | | | | | | |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |

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Debtor 1 Alexander Torres

| | No. None of the above applies. Go to I | Part 12. | | |
|-----|--|---|--|--|
| | ☐ Yes. Check all that apply above and fill | in the details below for each business. | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed | |
| | | | Dates Business existed | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | |
| | ■ No | | | |
| | ☐ Yes. Fill in the details below. | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| | | | | |

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Case number (if known) Debtor 1 Alexander Torres

| Part 12: Sign Below | | |
|---|--|---|
| are true and correct. I understand that m | ent of Financial Affairs and any attachments, and I de naking a false statement, concealing property, or ob- es up to \$250,000, or imprisonment for up to 20 year | taining money or property by fraud in connectio |
| /s/ Alexander Torres | | |
| Alexander Torres | Signature of Debtor 2 | |
| Signature of Debtor 1 | | |
| Date July 10, 2018 | Date | |
| | Statement of Financial Affairs for Individuals Filing | for Bankruptcy (Official Form 107)? |
| ■ No | | |
| ☐ Yes | | |
| Did you pay or agree to pay someone w | no is not an attorney to help you fill out bankruptcy | forms? |
| ■ No | | |
| ☐ Yes. Name of Person Attach the | e Bankruptcy Petition Preparer's Notice, Declaration, an | nd Signature (Official Form 119). |

connection

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| Fill in this inform | ation to identify your | 2222 | | | | |
|-----------------------------------|---|-----------------------|---------------|--|---------------|--------------------------------------|
| | ation to identify your | case: | | | | |
| Debtor 1 | Alexander Torres First Name | Middle Name | | Last Name | _ | |
| Debtor 2 | i iist ivaille | Middle Name | | Lastivanie | | |
| (Spouse if, filing) | First Name | Middle Name | | Last Name | - | |
| United States Ban | kruptcy Court for the: | NORTHERN DIST | RICT OF ILL | INOIS | _ | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing |
| | | | | | | S |
| Official For | m 108 | | | | | |
| - | | n far Indiv | iduala | Eiling Under Che | optor 7 | |
| Statemen | t of intentio | n tor inaiv | iduais | Filing Under Cha | apter 1 | 12/15 |
| If you are an indiv | idual filing under cha | oter 7 vou must fill | out this for | m if: | | |
| | claims secured by yo | | out this for | | | |
| _ | d personal property a | | ot expired. | | | |
| You must file this | form with the court w er is earlier, unless th | ithin 30 days after | you file your | bankruptcy petition or by the duse. You must also send copies | | |
| | pple are filing together I date the form. | in a joint case, bot | h are equall | y responsible for supplying cor | rect informa | tion. Both debtors must |
| | nd accurate as possib ur name and case nun | | needed, atta | ach a separate sheet to this form | ո. On the toր | o of any additional pages, |
| | | , | | | | |
| Part 1: List You | ur Creditors Who Have | e Secured Claims | | | | |
| • | - | art 1 of Schedule D: | Creditors V | Vho Have Claims Secured by Pr | operty (Offic | ial Form 106D), fill in the |
| information bel | ow. ditor and the property the | nat is collateral | What do v | ou intend to do with the proper | tv that | Did you claim the property |
| identity the erec | and the property to | | secures a | | | as exempt on Schedule C? |
| | | | | | | |
| Creditor's Gr | n Financial | | □ Surrond | for the property | | □ No |
| name: | II I IIIaliciai | | | ler the property. the property and redeem it. | | LI NO |
| | | | _ | the property and enter into a | | Yes |
| Description of | 2013 Nissan Altima | 52000 miles | | mation Agreement. | | |
| property | | | ☐ Retain t | the property and [explain]: | | |
| securing debt: | | | | | | |
| Part 2: List You | ur Unexpired Persona | I Property I eases | | | | |
| For any unexpired | d personal property lea | ase that you listed i | | G: Executory Contracts and Un | | |
| | | | | es are leases that are still in effo oes not assume it. 11 U.S.C. § 3 | | e period has not yet ended. |
| Describe your un | expired personal proj | perty leases | | | Will t | he lease be assumed? |
| | | · | | | | |
| Lessor's name: | and | | | | Пи | 0 |
| Description of leas Property: | seu | | | | ПΥ | 6 9 |
| | | | | | | ~~ |
| Lessor's name: | | | | | □N | 0 |
| Description of least Property: | sed | | | | | |
| i topolty. | | | | | ПΥ | es |
| Lessor's name: | | | | | □ м | 0 |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Debtor 1 Alexander Torres | Case number (if known) |
|--|---|
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention all property that is subject to an unexpired lease. | bout any property of my estate that secures a debt and any personal |
| X /s/ Alexander Torres Alexander Torres Signature of Debtor 1 | Signature of Debtor 2 |
| DateJuly 10, 2018 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-81449 Doc 1 Filed 07/10/18 Entered 07/10/18 13:49:28 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | e Alexander Torres | | Case No. | |
|-------|---|--|------------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENS | SATION OF ATTOR | RNEY FOR DI | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or | of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | | 1,467.00 |
| | Prior to the filing of this statement I have received | | \$ | 1,467.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | \$_335.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed compens | sation with any other person | unless they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | |
| 6. | In return for the above-disclosed fee, I have agreed to rende | er legal service for all aspects | s of the bankruptcy of | case, including: |
| | a. [Other provisions as needed] see attached fee agreement | | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any discharg adversary proceeding or any Inquiries into the | eability actions, judicial lie | | ef from stay actions or any other |
| | (| CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of any agoankruptcy proceeding. | greement or arrangement for | payment to me for r | epresentation of the debtor(s) in |
| J | luly 10, 2018 | /s/ Jacob Maegli | | |
| I | Date | Jacob Maegli 6317 | | |
| | | Signature of Attorne Eric Pratt Law Firm | | |
| | | 5411 E. State St, S | Ste 202 | |
| | | Rockford, IL 61108 | | |
| | | 815-315-0683 Fa: rockford@jordanpr | | |
| | | Name of law firm | | |

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| CHAPTER / FLAT File Eric Pratt Law Firm, P.C. ("Attorney"), is engaged to represent _ | E AGREEMENT |
|--|---|
| ("Client"), in a Chapter 7 Bankruptcy. Attorney and Client agree and Schedules, Representation at the 341(a) meeting, This agreements, court appearances, including but not limited to, dis Trustee, lien avoidance, inquiries into the value of assets or incomotions, or adversary proceeding. Additional fees will be required. | e that this representation includes the Petition, Statements eement does NOT include representation in reaffirmation schargability complaints, motion to dismiss filed by US ome. 2004 exams, or any other hearing, contested |
| Client agrees to pay Attorney a flat fee of \$ | for the services described above together with the credit I amount of work required based on the information implete, incorrect, or changes before the time Client's e matter may change, causing the flat fee amount to on the flat fee, including but not limited to, the \$335 filing ash to be placed in the Trust account. The flat fee, upon s Attorney to deposit these funds in Attorney's business of fee basis, Client elects to pay Attorney on a flat fee utily rate fee structure. The firm will begin work on the |
| Client understands that bankruptcy laws only allow for protection unprotected, Client understands the Chapter 7 Trustee can sell and that the US Trustee may object to the filing of a Chapter 7 if filing a Chapter 13. | it if Client does not or cannot buy out the Trustee's interest |
| Certain debts are not dischargeable under the bankruptcy laws, undisclosed debts, debt related to family court matters (support/incurred after filing, future association/condo HOA dues, or any are reaffirming a debt, Attorney is not responsible if the lender family condo have a second sec | maintenance), fines, debts incurred by fraud, debts other debt found non-dischargeable by the Judge. If you |
| Client agrees not to transfer any property or incur any debt with Client agrees to make full disclosure of all income, expenses, debankruptcy petition. | out expressed permission from Attorney or the Court. ebts, and assets at the initial consultation and on the |
| Client understands bankruptcy law requires the completion of a both the pre-filing and post-filing course independently of this ag certificates are received. If Client's case is closed without dischapost-filing course, Client shall be required to pay fees and cost re | reement and working with Attorney to make sure that the arge by the Bankruptcy Court due to failure to complete |
| Attorney-Client relationship terminates and the attorney's file will otherwise specified on this document. In the event the relationsl Attorney shall deduct the amount of \$ prior to refunding. Attorney to transfer any funds held in the trust account to the opethe amounts due and owing to either party can be properly assess accordance with the laws governing such records and will be designed. | hip terminates prior to the filing of the bankruptcy case, Therefore, \$ £ \(\cdot \cdot \cdot \) is non-refundable. Client authorizes erating account at the time of such termination to ensure essed. Any and all physical records will be maintained in |
| By signing this agreement, I agree that I have had an opportunity agreement, and have had an opportunity to ask questions and have | y to discuss the agreement with Attorney, understand the ave received an explanation for any questions that I had. |
| CLIENT P | ERIC PRATT LAW FIRM, P.C. |
| | Total: \$1500 Toky Then 375 NEXT |
| If payment via debit card, payments are as follows: \$ | _today. Then, \$on the ng on and will be automatic |
| via debit card on file with no prior authorization necessary. The f | iling fee of \$335.00 cannot be debited from the card and |

shall be paid via check or cash on prior to filing.

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United States Bankruptcy Court Northern District of Illinois

| In re | Alexander Torres | | Case No. | |
|-------|--|---|----------------------------|----------------|
| | | Debtor(s) | Chapter 7 | |
| | | | | |
| | VI | ERIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of C | Creditors: | 26 |
| | The above-named Debtor(s) (our) knowledge. |) hereby verifies that the list of creditor | ors is true and correct to | the best of my |
| Date: | July 10, 2018 | /s/ Alexander Torres Alexander Torres | | |
| | | Signature of Debtor | | |

Afni, Inc. Po Box 3097 Bloomington, IL 61702

Amex Po Box 297871 Fort Lauderdale, FL 33329

Blitt and Gaines 661 W Glenn Ave Wheeling, IL 60090

Cap1/bstby Po Box 30253 Salt Lake City, UT 84130

Chase Card Po Box 15298 Wilmington, DE 19850

Choice Recovery 1550 Old Henderson Rd St Columbus, OH 43220

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Curacao 1605 W Olympic Blvd Ste Los Angeles, CA 90015

Dsnb Macys Po Box 8218 Mason, OH 45040

Genesis Bc/celtic Bank 268 S State St Ste 300 Salt Lake City, UT 84111

Gm Financial Po Box 181145 Arlington, TX 76096 Healthcare Coll I Llc 2224 W Northern Ave Ste Phoenix, AZ 85021

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502

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Stanisccontr 914 14th St Modesto, CA 95353

Syncb/chevron P.o Box 965015 Orlando, FL 32896

Syncb/dillards Dc Po Box 965024 Orlando, FL 32896

Syncb/jcp Po Box 965007 Orlando, FL 32896 Syncb/lowes Po Box 965005 Orlando, FL 32896

Syncb/walmart Dc Po Box 965024 Orlando, FL 32896

Tbom/total Crd 5109 S Broadband Lane Sioux Falls, SD 57109

Thd/cbna Po Box 6497 Sioux Falls, SD 57117